Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H23000009682 3)))



Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : LEGALZOOM.COM INC.

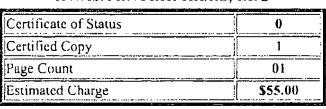
Account Number : I20010000062

Phone : (323)962-8600 fax Number : (323)389-0502

**Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please. **

Email Address:____

LLC AMND/RESTATE/CORRECT OR M/MG RESIGN ZWAJA ENTERPRISES, LLC



Electronic Filing Menu Corporate Filing Menu

Help

COVER LETTER

TO: Registration S Division of Co				
ZWAJA E	ENTERPRISES, LLC			
SUBJECT:	Name of Lin	nited Liability Company		
The enclosed Articles of	Amendment and fee(s) are sub	unitted for filing.		
Please return all corresp	ondence concerning this matter	to the following:		
	Cheyenne Moseley			
		Name of Person		
	Legalzoom.com, Inc.			
		Firm/Company		
	101 N Brand Blvd 11th Fl			
	······································	Address		2023
	Glendale, CA 91203			
		City/State and Zip Code		N-9 PHI2
	zwajaenterprises@gmail.co			∴ ⊒
		to be used for future annual report notifi	cation)	PH 12: 59
For further information of	concerning this matter, please c	all;		ំ ភូ
Cheyenne Moseley		800 773-0888 at ()		
Name (of Person	at () Area Code Daytime	Telephone Number	
Enclosed is a check for t	he following amount:			
□ \$25,00 Filing Fee	<u>-</u>	■ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	☐ \$60.00 Filing F Certificate of Certified Cop raddmonal copy i	Status & Y
Regist Divisio P.O. B	JING ADDRESS: ration Section on of Corporations lox 6327 assec. FL 32314	STREET/COURING Registration Section Division of Corpora Clinton Building 2661 Executive Cer	i tions	

Tallahassee, FL 32301

To:

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

ZWAJA ENTERPRISES, LLC				
(<u>Name of the Limited Liability Compa</u> (A Florida Limited)	ny as it now appears on o Liability Company)	our records.)		
The Articles of Organization for this Limited Liability Company Florida document number $\frac{L22000007728}{}$.	were filed on 12/29/20	021	_ and assi	gnod
This amendment is submitted to amend the following:				
A. If amending name, enter the new name of the limited liab	ility company here:			
Zwaja Creations, ELC				
The new name must be distinguishable and contain the words "Limited Erabil	ity Company," the designa	uron "LLC" or the abbre	viation "L L	.c
Enter new principal offices address, if applicable:				
(Principal office address MUST BE A STREET ADDRESS)			•	202
				۷.
			•	-az
Unter your mailing address if applicables				9
Enter new mailing address, if applicable:			£ P	φ π
(Mailing address MAY BE A POST OFFICE BOX)			•	- 15 -
			* P	
				, GD
B. If amending the registered agent and/or registered of registered agent and/or the new registered office address here Name of New Registered Agent:		records, enter in	e name o	1 the ne
Nicos Declaration (NICos NICos)				
New Registered Office Address:	Enter Florida str	cet address		
		Florida		
	Cuy		Zip Code	
New Registered Agent's Signature, if changing Registered Agent:				
I hereby accept the appointment as registered agent and agre	re to act in this canae	aty. I further agree	rto compl	e with the

A nevery accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent as provided for in Chapter 605, F.S. Or, if this document is being filed to merely reflect a change in the registered office address. Thereby confirm that the limited liability company has been notified in writing of this change.

_□ Change

If amending Authorized Person(s) authorized to manage, <u>enter the title, name, and address of each person, being added or removed from our records</u>:

Title	Name	Address	Type of Action
			□ Remove
			☐ Change
			☐ Remove
			□ Change
			Add Add Add Sg
			☐ Remove
			□ Remove
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<u>-</u>			Did
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ective date, if other than the	date of filing:		(optional)	
ective date, if other than the effective date is listed, the date this blee. If the date inserted in this blee.	be specific and cannot be prior to	odate of filing or more than 90 ble statutory filing requiren	days after filing.) Pursuam ments, this date will not	t to 605,020 be listed a
ument's effective date on the D	partment of State's records.			
	. Jane Bare and a 188 and a 189		the en the me and a	. باد میشم بید
cord specifies a delayed effective filed.	: date, but not an effective tim	ic, at 12:01 a.m. on the cut	ner ar: (b) The 90th as	ay after the
December 21	2022			
ed		,		
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Typed or printed name of signee